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Fill in this information to identify your	case:		
United States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOURI			
Case number (if known):	_ Chapter you are filing under:		
	✓ Chapter 7		
	Chapter 11		
	Chapter 12	I п	Check if this is a
	Chapter 13		amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Tiaura First Name L Middle Name	First Name Middle Name
	pacepolity.	Wilson Washington	
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First Name	First Name
	Include your married or	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
	Only the last 4 digits of your Social Security	xxx - xx - <u>7</u> <u>2</u> <u>4</u> <u>0</u>	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number	9xx - xx -	9xx - xx -

(ITIN)

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Debtor 1 Tiaura L Wilson W		ıra L Wilson Was	ashington Ca			Case n	Case number (if known)		
			About Deb	tor 1:		Ab	oout Debtor 2 (S	pouse Only i	n a Joint Case):
4.	Any busines	er	✓ I have	not used any busine	ess names or EIN	Ns.	I have not use	ed any busines	s names or EINs.
	Identification (EIN) you hathe last 8 year	ve used in	Business nan	ne		Bu	siness name		
	Include trade		Business nan	ne		Bu	siness name		
	doing busine	ss as names	Business nan	ne		Bu	siness name		
			<u></u> =	·	- — — —	EIN	<u> </u>		
			<u></u>	·		EIN	<u> </u>		
5.	Where you li	ve				lf I	Debtor 2 lives at	t a different a	ddress:
			3255 Herr Number S	moso Dr treet		- Nu	mber Street		
			Florissan		63033	-		0	710.0
			City Saint Lou	State	ZIP Code	Cit	у	State	ZIP Code
			County			Co	unty		
			the one ab	iling address is difformation ove, fill it in here. No end any notices to your dress.	lote that the	fro wil	Debtor 2's mailing myours, fill it in the send any notice didress.	n here. Note	that the court
			Number S	itreet		– Nu	mber Street		
			P.O. Box			P.(O. Box		
			City	State	ZIP Code	Cit	у	State	ZIP Code
6.	Why you are	_	Check one	:		Cł	neck one:		
	this district the bankruptcy	to file for	petitio	he last 180 days bef n, I have lived in this n any other district.	•		Over the last of petition, I have than in any other	e lived in this o	•
				another reason. Ex 28 U.S.C. § 1408.)	plain.		I have anothe (See 28 U.S.C		lain.
P	Part 2: Te	II the Court Ab	out Your B	ankruptcy Case					
7.	The chapter Bankruptcy	Code you		(For a brief description (Form 2010)). Als				- ',	-
	are choosing under	g to file		.7					
			☐ Chapter	· 11					
			☐ Chapter	12					
			☐ Chapter	· 13					

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Der	I laura L Wilson W	asnington		Case	number (if known)			
8.	How you will pay the fee	cour pay	t for more details abo with cash, cashier's c	ut how you may pay. Typ	ically, if you are pay your attorney is sub	ne clerk's office in your local ying the fee yourself, you may mitting your payment on your nted address.		
			I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).					
•		By la than fee i	aw, a judge may, but in 150% of the official properties. If you	s not required to, waive you	our fee, and may do your family size an must fill out the App	you are filing for Chapter 7. so only if your income is less d you are unable to pay the dication to Have the Chapter 7		
9.	Have you filed for	☑ No						
	bankruptcy within the last 8 years?	Yes.						
		District _		WI	hen	Case number		
		District _		WI	hen MM / DD / YYYY	Case number		
		District _		WI	hen MM / DD / YYYY	Case number		
10.	Are any bankruptcy cases pending or being	☑ No						
	filed by a spouse who is	Yes.						
	not filing this case with you, or by a business	Debtor _			Relationsh	nip to you		
	partner, or by an affiliate?	District _		WI	hen MM / DD / YYYY	Case number,if known		
		Debtor _			Relationsh	nip to you		
		District _		WI	hen MM / DD / YYYY	Case number,if known		
11.	Do you rent your residence?	✓ No. ☐ Yes.	Go to line 12. Has your landlord of	obtained an eviction judgn	nent against you?			
					_	Against You (Form 101A)		

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Deb	tor 1 Tiaura L Wilson Wa	shing	gton		Ca	ase number (if known)		
Pa	art 3: Report About Ar	ıy Bı	ısine	sses You Own as	a Sole Proprie	tor		
12.	Are you a sole proprietor of any full- or part-time business?			Go to Part 4. Name and location of I	business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any Number Street				
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Single Asset Rea Stockbroker (as	iness (as defined in al Estate (as define defined in 11 U.S.C ter (as defined in 11	n 11 U.S.C. § 101(27A)) d in 11 U.S.C. § 101(51). § 101(53A))		ode
13.	13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business		set ap st rece	ppropriate deadlines. If nt balance sheet, stater	you indicate that you ment of operations,	ow whether you are a srou are a small business cash-flow statement, arprocedure in 11 U.S.C.	debtor, you nd federal ir	nust attach your ncome tax return
	debtor?	$\overline{\mathbf{V}}$	No.	I am not filing under C	Chapter 11.			
	For a definition of small business debtor, see		No.	I am filing under Chap the Bankruptcy Code.		DT a small business deb	otor accordii	ng to the definition in
	11 U.S.C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code.	oter 11 and I am a s	small business debtor a	ccording to	the definition in the
Pa	Report If You Ov	vn o	r Hav	e Any Hazardous	Property or An	y Property That N	eeds Imn	nediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable		No Yes.	What is the hazard?				
	hazard to public health or safety? Or do you own any property that needs immediate attention?			If immediate attention	is needed, why is i	t needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property	? Number Street			
					City		State	ZIP Code

Debtor 1 Tiaura L Wilson Washington Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not	requir	ed to re	ceive a briefin	g about		
credit counseling because of:						

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making

rational decisions about finances.

Ability. My physical disability causes me

reasonably tried to do so.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing	about
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Tiaura		aura L Wilson Washington				Case number (if	Case number (if known)		
Part 6: Answer These Qu			uest	estions for Reporting Purposes					
16. What kind of debts do you have?			16a.	•	idual pr	sumer debts? Consumer de imarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."	
		16b.	 Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 						
			16c.	. State the type of debts	you ow	e that are not consumer or bu	sines	s debts.	
17. Are you filing under Chapter 7?				No. I am not filing under	er Chap	ter 7. Go to line 18.			
	any exempexcluded administrate paid the available f	timate that after of property is and tive expenses at funds will be or distribution red creditors?		-		•	-	xempt property is excluded and to distribute to unsecured creditors?	
18.	-	r creditors do ate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000	
19.	How much estimate y be worth?	n do you our assets to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.	How much estimate y be?	n do you our liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	0000	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	

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Debtor 1	Tiaura L Wilson W	/ashington	Case number (if known)		
Part 7:	Sign Below				
or you		I have examined this petition, and I declare und and correct.	ler penalty of perjury that the information provided is true		
		•	ware that I may proceed, if eligible, under Chapter 7, 11, 12, and the relief available under each chapter, and I choose to		
		If no attorney represents me and I did not pay o fill out this document, I have obtained and read	r agree to pay someone who is not an attorney to help me the notice required by 11 U.S.C. § 342(b).		
		I request relief in accordance with the chapter of	f title 11, United States Code, specified in this petition.		
		•	ling property, or obtaining money or property by fraud in fines up to \$250,000, or imprisonment for up to 20 years, 71.		
		X /s/ Tiaura L Wilson Washington Tiaura L Wilson Washington, Debtor 1	X Signature of Debtor 2		
		Executed on 03/04/2019	Executed on		

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Tiaura L Wilson	Washington	Case number (if know	vn)		
For your attorney, if you are represented by one f you are not represented by an attorney, you do not need to file this page.	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained relief available under each chapter for which the person is eligible. I also certify that I have delivered the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies certify that I have no knowledge after an inquiry that the information in the schedules filed with the period is incorrect.				
	X /s/ Jonathan Brent Signature of Attorney for Debte		e 03/04/2019 MM / DD / YYYY		
	Jonathan Brent Printed name				
	Jonathan Brent Attorney Firm Name 462 N Taylor Number Street	at Law			
	Suite 105				
	St. Louis	MO	63108		
	City	State	ZIP Code		
	Contact phone (314) 200-5: 59169MO	346 Email address			
	Bar number	State	<u> </u>		

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Fill in this inf	ormation to ic	dentify your case	and this filing:		
Debtor 1	Tiaura	L	Wilson Washington		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for	the: EASTERN DIS	STRICT OF MISSOURI		
Case number				☐ Chack	if this is an
(if known)				—	ded filing
Official Form	106A/R				
Schedule A		/			12/15
the asset in the ca filing together, bo sheet to this form	ategory where yo oth are equally res n. On the top of a	ou think it fits best. B sponsible for supplyi ny additional pages,	ist an asset only once. If an ass Be as complete and accurate as ing correct information. If more write your name and case numl	possible. If two married pe space is needed, attach a ber (if known). Answer eve	eople are separate ery question.
			t in any residence, building, land		
✓ No. Go	to Part 2. here is the property	•		,	
	•	-	of your entries from Part 1, incl rite that number here	_	\$0.00
Part 2: De	escribe Your V	ehicles			
		•	n any vehicles, whether they are also report it on Schedule G: Exe	_	•
3. Cars, vans, t	rucks, tractors, s	port utility vehicles, i	motorcycles		
□ No ☑ Yes					
3.1. Make:	Ford	Who has a	an interest in the property?	Do not deduct secured clai	ims or exemptions. Put the ims on Schedule D:
Model:	Explorer		or 1 only	Creditors Who Have Claim	
Year:	2014	<u> </u>	or 2 only	Current value of the entire property?	Current value of the portion you own?
Approximate milea	ige: 128,000		or 1 and Debtor 2 only ast one of the debtors and another		\$11,000.00
Other information:		_			
2014 Ford Explo miles)	orer (approx. 12	· —	k if this is community property instructions)		
			recreational vehicles, other vehit, fishing vessels, snowmobiles, n		
✓ No ☐ Yes				·	
	-	•	of your entries from Part 2, incl	uding any	\$11,000.00

Official Form 106A/B Schedule A/B: Property page 1

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Deb	otor 1	Tiaura L Wilson Washington	Case number (if known)	
Р	art 3:	Describe Your Personal and Household Items		
Do	you own	or have any legal or equitable interest in any of the following items?	!	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		nold goods and furnishings es: Major appliances, furniture, linens, china, kitchenware		
	☐ No ✓ Yes	s. Describe Miscellaneous household goods and furnishings	-	\$200.00
7.	Electro Exampl	 nics es: Televisions and radios; audio, video, stereo, and digital equipment; com music collections; electronic devices including cell phones, cameras, me 	•	
	□ No ✓ Yes	s. Describe Miscellaneous household electronics		\$500.00
8.		ibles of valuees: Antiques and figurines; paintings, prints, or other artwork; books, pictures stamp, coin, or baseball card collections; other collections, memorabilia,	•	
	✓ No ☐ Yes	s. Describe		
9.		nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, po canoes and kayaks; carpentry tools; musical instruments	ol tables, golf clubs, skis;	
	✓ No ☐ Yes	s. Describe		
10.	Firearn Exampl	ns les: Pistols, rifles, shotguns, ammunition, and related equipment		
	✓ No ☐ Yes	s. Describe		
11.	Clothes Example	s les: Everyday clothes, furs, leather coats, designer wear, shoes, accessories		
	□ No ✓ Yes	s. Describe Clothes and miscellaneous wearing apparel	-	\$500.00
12.	Jewelr y Example	 / es: Everyday jewelry, costume jewelry, engagement rings, wedding rings, he gold, silver 	irloom jewelry, watches, gems,	
	□ No ✓ Yes	s. Describe Miscellaneous costume jewelry		\$50.00
13.		rm animals les: Dogs, cats, birds, horses		
	✓ No ☐ Yes	s. Describe		
14.	Any oth	ner personal and household items you did not already list, including any list	health aids you	
	_	s. Give specific		
15.		e dollar value of all of your entries from Part 3, including any entries for	pages you have	\$1,250.00

Official Form 106A/B Schedule A/B: Property page 2

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Deb	tor 1 Tiaura L Wilson Washi	ngton Case number (if ki	nown)
P	art 4: Describe Your Fina	ncial Assets	
Do	you own or have any legal or equit	able interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples: Money you have in your petition	wallet, in your home, in a safe deposit box, and on hand when you	ı file your
	No No	Cash:	\$0.00
17.	Deposits of money <i>Examples:</i> Checking, savings, or o	ther financial accounts; certificates of deposit; shares in credit unic other similar institutions. If you have multiple accounts with the sa	ons,
	☐ No ☑ Yes	Institution name:	
	17.1. Checking account:	US Bank Checking account	\$200.00
	17.2. Savings account:	US Bank Savings account	\$10.00
	✓ No YesInstitut	accounts with brokerage firms, money market accounts on or issuer name:	
19.	Non-publicly traded stock and interest in an LLC, partnership ✓ No ✓ Yes. Give specific information about them		ownership:
20.	Negotiable instruments include pers	s and other negotiable and non-negotiable instruments sonal checks, cashiers' checks, promissory notes, and money orde se you cannot transfer to someone by signing or delivering them. name:	rs.
21.	Retirement or pension accounts Examples: Interests in IRA, ERISA profit-sharing plans No Yes. List each account separately. Type of a	, Keogh, 401(k), 403(b), thrift savings accounts, or other pension o account:	r
22.		ou have made so that you may continue service or use from a comords, prepaid rent, public utilities (electric, gas, water), telecommunic	
23.	☑ No	Institution name or individual:	of years)

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Deb	tor 1 Tiaura L Wilson Wash	ington	Case number (if kno	wn)
24.	Interests in an education IRA, in 26 U.S.C. §§ 530(b)(1), 529A(b), a	•	ABLE program, or under a qualified stat	e tuition program.
	✓ No	tion name and description	Canarataly file the records of any interest	. 11 I I C C & E21(a)
25	_		Separately file the records of any interests anything listed in line 1), and rights or	3. 11 U.S.C. § 521(C)
20.	powers exercisable for your ben		anything noted in line 1), and rights of	
	No No Civo appoific			
	Yes. Give specific information about them			
26.	Patents, copyrights, trademarks, Examples: Internet domain names		* * * * * * * * * * * * * * * * * * *	
	No No Civa anacitia			
	Yes. Give specific information about them			
27.	Licenses, franchises, and other of Examples: Building permits, exclusions	•	ssociation holdings, liquor licenses, profes	ssional licenses
	☑ No			
	Yes. Give specific information about them			
Mor	ney or property owed to you?			Current value of the
				portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you			
	✓ No			Entrod
	Yes. Give specific information about them, including whether			Federal:
	you already filed the returns and the tax years			State:
	·			Local:
29.		alimony, spousal support, ch	nild support, maintenance, divorce settlem	ent, property settlement
	✓ No✓ Yes. Give specific information		Alimon	y:
			Mainter	nance:
			Suppor	t:
			Divorce	e settlement:
			Propert	y settlement:
30.	Other amounts someone owes y	ou		
	Examples: Unpaid wages, disabilit	y insurance payments, disal	oility benefits, sick pay, vacation pay, work ns you made to someone else	kers'
	✓ No✓ Yes. Give specific information			
31.	Interests in insurance policies Examples: Health, disability, or life	e insurance; health savings a	account (HSA); credit, homeowner's, or re	nter's insurance
	✓ No ☐ Yes. Name the insurance			
	company of each policy		D	Occurred to the state of the st
	and list its value C	Company name:	Beneficiary:	Surrender or refund value:

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Deb	or 1 Tiaura L Wilson Washington	Case number (if known)	
32.	Any interest in property that is due you from someone who has di If you are the beneficiary of a living trust, expect proceeds from a life in entitled to receive property because someone has died		
	✓ No✓ Yes. Give specific information	-	_
33.	Claims against third parties, whether or not you have filed a lawsu Examples: Accidents, employment disputes, insurance claims, or righ		
	✓ No Yes. Describe each claim	-	
34.	Other contingent and unliquidated claims of every nature, includir rights to set off claims	ng counterclaims of the debtor and	
	✓ No ☐ Yes. Describe each claim	-	
35.	Any financial assets you did not already list		
	✓ No✓ Yes. Give specific information	-	
36.	Add the dollar value of all of your entries from Part 4, including an attached for Part 4. Write that number here		\$210.00
Pa	rt 5: Describe Any Business-Related Property You O	wn or Have an Interest In. List any re	eal estate in Part 1
37.	Do you own or have any legal or equitable interest in any busines	s-related property?	
	₩ No. Go to Part 6.		
	Yes. Go to line 38.		
		1 1	Current value of the cortion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you already earned		
	✓ No ☐ Yes. Describe	-	
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, of desks, chairs, electronic devices	copiers, fax machines, rugs, telephones,	
	✓ No Yes. Describe	-	
40.	Machinery, fixtures, equipment, supplies you use in business, and	tools of your trade	
	✓ No ☐ Yes. Describe	-	
41.	Inventory		
	✓ No ☐ Yes. Describe	-	
42.	Interests in partnerships or joint ventures		
	✓ No ✓ Yes. Describe Name of entity:	% of ownership:	

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Deb	tor 1	Tiaura L Wilson Washington	Case number (if known)	
43.	Custor	ner lists, mailing lists, or other compilations		
	☑ No			
		 Do your lists include personally identifiable information (as defined in No 	n 11 U.S.C. § 101(41A))?	
		Yes. Describe		
44.	Any bu	siness-related property you did not already list		
	✓ No ☐ Yes	s. Give specific information.		
45.		e dollar value of all of your entries from Part 5, including any entries for ed for Part 5. Write that number here		\$0.00
Pa		Describe Any Farm- and Commercial Fishing-Related Proplet you own or have an interest in farmland, list it in Part 1.	perty You Own or Have ar	n Interest In.
46.	Do you	ı own or have any legal or equitable interest in any farm- or commercial	fishing-related property?	
		. Go to Part 7. s. Go to line 47.		
				Current value of the
				portion you own? Do not deduct secured claims or exemptions.
47.	Farm a Examp	unimals les: Livestock, poultry, farm-raised fish		
	✓ No ☐ Yes			
48.	Crops-	-either growing or harvested		
	✓ No			
		s. Give specific prmation		
49.	Farm a	and fishing equipment, implements, machinery, fixtures, and tools of tra	de	
	✓ No			
50.	_	and fishing supplies, chemicals, and feed		
	✓ No			
51.	Any fa	rm- and commercial fishing-related property you did not already list		
		s. Give specific		
52.		e dollar value of all of your entries from Part 6, including any entries for ed for Part 6. Write that number here		\$0.00
Pa	art 7:	Describe All Property You Own or Have an Interest in Tha	t You Did Not List Above	
53.	-	have other property of any kind you did not already list? les: Season tickets, country club membership		
	✓ No	s. Give specific information.		

Official Form 106A/B Schedule A/B: Property page 6

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Debtor 1	Tiaura L Wilson Washington	Case nu	ımber (if known)	
54. Add t	he dollar value of all of your entries from Part 7. Write t	nat number here	→	\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Part 1	: Total real estate, line 2		→	\$0.00
56. Part 2	2: Total vehicles, line 5	\$11,000.00		
57. Part 3	3: Total personal and household items, line 15	\$1,250.00		
58. Part 4	l: Total financial assets, line 36	\$210.00		
59. Part 5	i: Total business-related property, line 45	\$0.00		
60. Part 6	3: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7	7: Total other property not listed, line 54	+\$0.00		
62. Total	personal property. Add lines 56 through 61	\$12,460.00	Copy personal property total	+ \$12,460.00
63. Total	of all property on Schedule A/B. Add line 55 + line 62			\$12,460.00

Official Form 106A/B Schedule A/B: Property page 7

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Fill in this inf	ormation to i	dentify your	case:				
Debtor 1	Tiaura	L	Wilson V	Vashingto	on		
Debtor 2	First Name	Middle Name	e Last Name				
(Spouse, if filing)	First Name	Middle Name	e Last Name				
United States Ba	nkruptcy Court fo	r the: EASTER I	N DISTRICT OF MI	SSOURI		☐ Check if this is an	
Case number (if known)				<u> </u>		amended filing	
Official Form	106C						
Schedule C	: The Prope	erty You Cl	aim as Exem	pt			04/16
Using the property	you listed on <i>Sch</i> ill out and attach t	<i>hedule A/B: Prop</i> to this page as m	perty (Official Form 10	6A/B) as yo	our source, list th	esponsible for supplying correct inform e property that you claim as exempt. essary. On the top of any additional p	If more
is to state a speci exempted up to the receive certain be exemption of 100°	fic dollar amoun ne amount of any enefits, and tax-e % of fair market	t as exempt. Al applicable stat exempt retirement value under a la	Iternatively, you may tutory limit. Some e nt fundsmay be un aw that limits the exe	claim the xemptions limited in to emption to	full fair marketsuch as those dollar amount. I a particular doll	you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an lar amount and the value of the le statutory amount.	
Part 1: Ide	entify the Prop	perty You Cla	aim as Exempt				
1. Which set of	exemptions are	you claiming?	Check one only,	even if you	ır spouse is filing	with you.	
للنا ا	=		nkruptcy exemptions. U.S.C. § 522(b)(2)	11 U.S.C.	§ 522(b)(3)		
2. For any prop	erty you list on S	Schedule A/B th	nat you claim as exe	mpt, fill in	the information	below.	
Brief description Schedule A/B that			Current value of the portion you own	Amount exemption	of the on you claim	Specific laws that allow exemption	on
			Copy the value from Schedule A/B	Check or each exe	•		
Brief description: 2014 Ford Explo miles) Line from Schedule		28,000	\$11,000.00	valu	\$0.00 % of fair market e, up to any icable statutory	Mo. Rev. Stat. § 513.430.1(5)	
Brief description:			\$200.00	$\overline{\mathbf{V}}$	\$200.00	Mo. Rev. Stat. § 513.430.1(1)	
Miscellaneous h	nousehold goo	ds and		1009	% of fair market	()	
furnishings Line from Schedule	e A/B: 6				e, up to any icable statutory		
-	•	•	more than \$160,375		or after the date	of adjustment.)	

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Debtor 1	Tiaura L Wilson Washington		Case number	r (if known)
Part 2:	Additional Page			
	ription of the property and line on A/B that lists this property	Current value of the portion you own	ount of the mption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	eck only one box for h exemption	
	iption: neous household electronics Schedule A/B:7	\$500.00	\$500.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(1)
apparel	iption: and miscellaneous wearing Schedule A/B:11	\$500.00	\$500.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(1)
	iption: leous costume jewelry Schedule A/B: <u>12</u>	\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(2)
Brief descri Cash Line from S	iption: Schedule A/B: 16	\$0.00	\$0.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(3)
	iption: Checking account Schedule A/B:17.1	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(3)
	iption: Savings account Schedule A/B: 17.2	\$10.00	\$10.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(3)

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			1 9 10 01 01			
Fill in this inf	ormation to identif	y your case:				
Debtor 1	Tiaura L		/ilson Washingt	ton_		
	First Name N	liddle Name La	ast Name			
Debtor 2 (Spouse, if filing)	First Name N	liddle Name La	ast Name			
United States Bar	nkruptcy Court for the: E	ASTERN DISTRICT	F OF MISSOURI	<u> </u>		
Case number (if known)					Check if this is amended filing	
Official Form	106D					
Schedule D:	Creditors Who	Have Claims	Secured by	Property		12/15
correct information On the top of any 1. Do any credit No. Che	nd accurate as possible on. If more space is need additional pages, write cors have claims secure ck this box and submit the in all of the information	eded, copy the Additi your name and case ed by your property? his form to the court wi	onal Page, fill it o number (if know	out, number the entri n).	es, and attach it to thi	s form.
Part 1: Lis	t All Secured Clain	าร				
creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the				Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Describe the prope secures the claim:	erty that	\$13,460.00	\$11,000.00	\$2,460.00
Creditor's name 137 North Virgil Number Street		- 2014 Ford Explor 128,000 miles) -	er (approx.			
Los Angeles City Who owes the det ☑ Debtor 1 only □ Debtor 2 only □ Debtor 1 and D □ At least one of □ Check if this of to a communit Date debt was inc	Debtor 2 only the debtors and another claim relates ty debt	Contingent Unliquidated Disputed Nature of lien. Che An agreement y Statutory lien (si	eck all that apply. ou made (such as uch as tax lien, me rom a lawsuit a right to offset)	mortgage or secured echanic's lien)	car loan)	
Add the dollar val	ue of your entries in Co	olumn A on this page	. Write	¢12.460.00]	

that number here:

\$13,460.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$13,460.00

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Fill in this inf	ormation to ic	lentify your c	ase:			
Debtor 1	Tiaura First Name	L Middle Name	Wilson Washington Last Name			
	riist Name	Middle Name	Lastiname			
Debtor 2 (Spouse, if filing)	Firet Name	Middle Name	Last Name			
(Spouse, ii iiiiig)	i iist ivaine	Middle Name	Lastivanie			
United States Ba	nkruptcy Court for	the: EASTERN	DISTRICT OF MISSOURI			
Case number				_	Chook if this is a	
(if known)				_	Check if this is a amended filing	ari
Official Farms	400E/E			J	S .	
Official Form						
Schedule E/	F: Creditor	s Who Have	e Unsecured Claims			12/1
Do not include an If more space is not to this page. On the	y creditors with placeded, copy the the top of any add	partially secured Part you need, fi litional pages, w	and on Schedule G: Executory Con claims that are listed in Schedule ill it out, number the entries in the crite your name and case number (D: Creditors Who Hoboxes on the left. At	old Claims Secur	ed by Property
			secured Claims			
	tors have priority	unsecured clair	ns against you?			
No. Go	to Part 2.					
Yes.						
claim. For ea show both pric more space is claim, list the	ch claim listed, ide ority and nonpriori s needed for priorit other creditors in	entify what type of ty amounts. As m y unsecured clair Part 3.	creditor has more than one priority uf claim it is. If a claim has both priorinuch as possible, list the claims in alms, fill out the Continuation Page of the instructions for this form in the instructions.	ity and nonpriority amo phabetical order acco Part 1. If more than o	ounts, list that clair rding to the credito	m here and or's name. If
2.1				\$0.00	\$0.00	\$0.0
Internal Revenu	e Service		Land A. Bailea of an annual annual an			****
Priority Creditor's Nam	ne		Last 4 digits of account number			
PO Box 7346 Number Street			When was the debt incurred?		-	
			As of the date you file, the claim	is: Check all that app	ly.	
-			Contingent			
Philedelphia		19101-7346	Unliquidated Disputed			
City Who incurred the		ZIP Code	— .	i		
Debtor 1 only	debt: Check o	ne.	Type of PRIORITY unsecured cla Domestic support obligations	ım:		
Debtor 2 only			Taxes and certain other debts	you owe the governm	ent	
Debtor 1 and D	Debtor 2 only Tthe debtors and a	nother	Claims for death or personal in	jury while you were		
—	claim is for a com		intoxicated Other. Specify			
Is the claim subje		, ,	Li Strict. Specify			
☑ No						
Yes						

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Debtor 1 I laura L Wilson Washington		Case number (if knowr	n)			
Part 1: Your PRIORITY Unsecured CI	aims Continuation Page					
After listing any entries on this page, number them previous page.	n sequentially from the	Total claim	Priority amount	Nonpriority amount		
2.2		\$0.00	\$0.00	\$0.00		
Missouri Department of Revenue Priority Creditor's Name	- Last 4 digits of account number					
Bankruptcy Unit	When was the debt incurred?					
Number Street PO Box 475						
301 W High St Jefferson City MO 65105 City State ZIP Code	 As of the date you file, the claim Contingent Unliquidated Disputed 	is: Check all that app	oly.			
Who incurred the debt? Check one.	Type of PRIORITY unsecured cla	aim:				
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Domestic support obligations Taxes and certain other debts Claims for death or personal in intoxicated Other. Specify		ent			

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Debtor 1 Tiaura L Wilson Washington	Case number (if known)	
Part 2: List All of Your NONPRIORIT	Y Unsecured Claims	
Do any creditors have nonpriority unsecured	d claims against you?	
	t. Submit this form to the court with your other schedules.	
✓ Yes	·	
4. List all of your nonpriority unsecured claims	in the alphabetical order of the creditor who holds each claim.	
type of claim it is. Do not list claims already inc	ecured claim, list the creditor separately for each claim. For each claim listed, cluded in Part 1. If more than one creditor holds a particular claim, list the other unsecured claims, fill out the Continuation Page of Part 2.	•
		Total claim
4.1		\$146.00
1STPROGRESS	Last 4 digits of account number 0 3 0 3	
Nonpriority Creditor's Name P.O. Box 9053	When was the debt incurred? 03/15/2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	□ Disputed	
Johnson City TN 37615 City State ZIP Code	Turns of NONDRIGHTY unpossured eleims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	onarge Account	
☑ No		
Yes		
4.2		\$3,068.00
ACCEPTANCE NOW	Last 4 digits of account number <u>3</u> <u>4</u> <u>9</u> <u>7</u>	
Nonpriority Creditor's Name 5501 HEADQUARTERS DR	When was the debt incurred? 03/26/2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	Disputed	
PLANO TX 75024 City State ZIP Code	_	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Charge Account	
No No		
Yes		

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Debtor 1 Tiaura L Wilson Washington	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$1,000.00
Advance America	Last 4 digits of account number	· ·
Nonpriority Creditor's Name 1261 S Laclede Station Rd	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Saint Louis MO 63119	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Payday Loan	
Is the claim subject to offset?		
<u>✓</u> No		
Yes		
4.4		\$330.00
Ameren UE	Last 4 digits of account number	Ψ330.00
Nonpriority Creditor's Name	When was the debt incurred?	
Rankruptcy Desk code 310 Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 66881	_ ☐ Contingent	
	Unliquidated	
Saint Louis MO 63166	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Control of the contro	
Is the claim subject to offset?		
☑ No		
Yes		
4.5		4500.00
	Last 4 divite of account number	\$500.00
AT&T Services Nonpriority Creditor's Name	Last 4 digits of account number	
One AT&T Way Rm 3A104	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
B. I.	Disputed	
Bedminster NJ 07921 City State ZIP Code	Type of NONDRIORITY uncopured eleims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
✓ Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
–	Other. Specify	
Check if this claim is for a community debt	Telecomunications	
Is the claim subject to offset? √ No		
✓ NO Yes		

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Debtor 1 Tiaura L Wilson Washington	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$1,376.00
Bank of America	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
4625 Lindell Blvd Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Saint Louis MO 63108	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	✓ Other. Specify Bank Account overdraft	
Is the claim subject to offset?	Dank / 1000 and 0101 and	
☑ No		
Yes		
4.7		\$530.00
Barnes Jewish Hospital	Last 4 digits of account number	\$550.00
Nonpriority Creditor's Name	When was the debt incurred?	
1 Barnes Jewish Hospital Plaza		
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
St. Louis MO 63110 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	☑ Other. Specify	
Check if this claim is for a community debt	Medical	
Is the claim subject to offset? No		
Yes		
4.8		\$1,000.00
Big Lots	Last 4 digits of account number	
Nonpriority Creditor's Name 8563 Watson Rd	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Saint Louis MO 63119		
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?		
☑ No		
Yes		

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Debtor 1 Tiaura L Wilson Washington	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.9		\$2,500.00
Cardinal Orthodontist	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
24 S Gore Ave Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Saint Louis MO 63119	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Medical	
Is the claim subject to offset?		
☑ No		
Yes		
4.10		\$2,000.00
Cashnet USA	Last 4 digits of account number	Ψ2,000.00
Nonpriority Creditor's Name	When was the debt incurred?	
200 West Jackson, Ste 2400	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
Chicago IL 60606	Disputed	
Chicago IL 60606 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Unsecured Loan	
Is the claim subject to offset?	Oliseculeu Loali	
No No		
Yes		
4.11		\$523.00
CBE Group Nonpriority Creditor's Name	Last 4 digits of account number2599	
1309 Technology Pkwy	When was the debt incurred? 06/08/2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	□ Disputed	
Cedar Falls IA 50613		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations spining out of a consection agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Collection Agency	
Is the claim subject to offset?		
✓ No Yes		

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Debtor 1 Tiaura L Wilson Washington	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.12		\$6,327.00
Department of Education Navient	Last 4 digits of account number 0 9 0 5	
Nonpriority Creditor's Name P.O. Box 9533	When was the debt incurred? 09/05/2017	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Wilkes Barre PA 18773		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations arising out of a separation agreement or divorce	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Loan	
No No		
Yes		
4.13		** ***
	Lock A digita of account number 0 C 0 0	\$3,693.00
Nonpriority Creditor's Name	Last 4 digits of account number 0 6 0 8 When was the debt incurred? 06/08/2015	
P.O. Box 9533	<u> </u>	
Number Street	As of the date you file, the claim is: Check all that apply. — Contingent	
	Unliquidated	
Wilkes Barre PA 18773	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ✓ Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
Check if this claim is for a community debt	Loan	
Is the claim subject to offset? ✓ No		
☑ No □ Yes		
4.14		\$3,500.00
Department of Education Navient Nonpriority Creditor's Name	Last 4 digits of account number0905_	
P.O. Box 9533	When was the debt incurred? 09/05/2017	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
William Days DA 40770	Disputed	
Wilkes Barre PA 18773 City State ZIP Code		
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Loan	
Is the claim subject to offset?		
☑ No		
Yes		

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Debtor 1 Tiaura L Wilson Washington	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.15		\$1,839.00
Department of Education Navient	Last 4 digits of account number 0 8 2 4	
Nonpriority Creditor's Name P.O. Box 9533	When was the debt incurred? 08/24/2015	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Wilkes Barre PA 18773		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations arising out of a separation agreement or divorce	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Loan	
No No		
Yes		
4.16		4
	Look A divite of account number 0 0 0 4	\$1,750.00
Nonpriority Creditor's Name	Last 4 digits of account number 0 9 0 4 When was the debt incurred? 09/04/2018	
P.O. Box 9533	<u> </u>	
Number Street	As of the date you file, the claim is: Check all that apply. — Contingent	
	Unliquidated	
Wilkes Barre PA 18773	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ✓ Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Loan	
Is the claim subject to offset?		
☑ No □ Yes		
4.17		\$1,063.00
Department of Education Navient	Last 4 digits of account number0904_	
Nonpriority Creditor's Name P.O. Box 9533	When was the debt incurred? 09/04/2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
William Dawns DA 40776	Disputed	
Wilkes Barre PA 18773 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?		
☑ No		
Yes		

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Debtor 1 Tiaura L Wilson Washington	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.18		\$516.00
Department of Education Navient	Last 4 digits of account number 0 8 2 4	<u> </u>
Nonpriority Creditor's Name	When was the debt incurred? 08/24/2015	
P.O. Box 9533 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Wilkes Barre PA 18773	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	✓ Other. Specify Loan	
Is the claim subject to offset?		
☑ No		
Yes		
4.19		\$248.00
Department of Education Navient	Last 4 digits of account number 0 6 0 8	<u> </u>
Nonpriority Creditor's Name	When was the debt incurred? 06/08/2015	
P.O. Box 9533		
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
William Day 49772	Disputed	
Wilkes Barre PA 18773 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
☑ Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	Loan	
✓ No		
Yes		
4.20		4. -. - .
	Lead A Pairs of account number 2000 F	\$1,569.00
Enhanced Recovery Nonpriority Creditor's Name	Last 4 digits of account number 8 6 5 5	
8014 Bayberry Rd	When was the debt incurred? 08/16/2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
-	_	
	Disputed	
JacksonvilleFL32256CityStateZIP Code	Type of NONDRIORITY (massaged alaim)	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
✓ Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Collection Attorney	
Is the claim subject to offset? √ No		
✓ NO Yes		

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Debtor 1 Tiaura L Wilson Washington	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.21		\$2,500.00
Familia Dental	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
2608 State St Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
East Saint Louis IL 62205	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Medical	
Is the claim subject to offset?	modisu.	
☑ No		
Yes		
4.22		****
	Last A Parks of account numbers 0 0 0 4	\$364.00
First Community CU Nonpriority Creditor's Name	Last 4 digits of account number0 _0 _2 _1	
17151 Chesterfield Airport Road	When was the debt incurred? 05/04/2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	— ☐ Disputed	
Chesterfield MO 63005		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations origing out of a consention agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
☐ Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?		
☑ No □ Yes		
4.23		\$6,324.00
First Community CU	Last 4 digits of account number 6 6 0 1	
Nonpriority Creditor's Name	When was the debt incurred? 04/08/2016	
17151 Chesterfield Airport Road Number Street	As of the date you file, the claim is: Check all that apply.	
- Circle	_ ☐ Contingent	
	Unliquidated	
Chesterfield MO 63005	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Oliseculeu Loali	
No		
Yes		

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Debtor 1 Tiaura L Wilson Washington	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.24		\$2,495.00
Hafner Court	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 1839	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Maryland Heights MO 63043 City State ZIP Code	— Tara of MONDRIORITY arrangement also	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Rent	
Is the claim subject to offset?		
✓ No Yes		
4.25		\$2,495.00
Hafner Court Apartments	Last 4 digits of account number	
Nonpriority Creditor's Name 8077 Hafner Ct	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
Saint Louis MO 63130 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Rent	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.26		\$500.00
LendNation	Last 4 digits of account number	
Nonpriority Creditor's Name 8208 Melrose Drive	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	Disputed	
Overland Park KS 66214 City State ZIP Code	Type of NONDDIODITY upgequed eleim:	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Charge Account	
Is the claim subject to offset?	-	
✓ No ☐ Yes		
□ 169		

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Debtor 1 Tiaura L Wilson Washington	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.27		\$87.00
Missouri American Water	Last 4 digits of account number	Ψοτίου
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 578 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Alton IL 62002	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Utilities	
Is the claim subject to offset?		
☑ No		
Yes		
4.28		\$1,000.00
Missouri Title Loans	Last 4 digits of account number	<u> </u>
Nonpriority Creditor's Name	When was the debt incurred?	
8900 St Charles Rock Rd Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ Contingent	
	Unliquidated	
Saint Ann MO 63074	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Payday Loan	
Is the claim subject to offset?	• •	
☑ No		
Yes		
4.29		\$5,273.00
One Advantage	Last 4 digits of account number 5 0 6 9	Ψ3,273.00
Nonpriority Creditor's Name	When was the debt incurred? 05/17/2018	
7650 Magna Dr Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent Contingent	
	Unliquidated	
Belleville IL 62223	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	✓ Other. Specify Collection Agency	
Is the claim subject to offset?	- · · · · · · · · · · · · · · · · · · ·	
☑ No		
Yes		

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Debtor 1 Tiaura L Wilson Washington	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.30		\$190.00
One Advantage	Last 4 digits of account number 2 9 8 4	<u> </u>
Nonpriority Creditor's Name	When was the debt incurred? 03/19/2018	
7650 Magna Dr Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Belleville IL 62223	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Collection Agency	
No No		
Yes		
4.31		\$300.00
PNC Bank	Last 4 digits of account number	
Nonpriority Creditor's Name Attn: Bankruptcy Dpt.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
One PNC Plaza	_ Contingent	
249 Fifth Ave.	Unliquidated	
Pittsburgh PA 15222	─	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ✓ Debtor 1 only	☐ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?		
☑ No		
Yes		
4.32		\$1,000.00
	Last 4 digits of account number	\$1,000.00
Quick Cash Nonpriority Creditor's Name	_ _ _ _ _ _ _ _ _ — _ _	
9905 St Charles Rock Rd	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	□ Contingent □ Unliquidated	
	Disputed	
Saint Ann MO 63074 City State ZIP Code	Tune of NONDRIORITY and a suite of significant	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Payday loan	
Is the claim subject to offset?		
☑ No □ Yes		
□ '53		

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Debtor 1 Tiaura L Wilson Washington	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.33		\$105.00
Republic Services	Last 4 digits of account number	· ·
Nonpriority Creditor's Name 406 Bayless Ave	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Saint Louis MO 63125 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Utilities	
Is the claim subject to offset?	Cimiles .	
✓ No ☐ Yes		
4.34		\$559.00
Spire Gas	Last 4 digits of account number	
Nonpriority Creditor's Name 700 Market St 2nd FI	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	— ☐ Disputed	
Saint Louis MO 63101 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Utilities	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.35		\$1,100.00
Sprint	Last 4 digits of account number	
Nonpriority Creditor's Name Attn Bankruptcy Dpt	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 3326		
	Disputed	
Englewood CO 80155 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Telecomunications	
Is the claim subject to offset?		
✓ No ☐ Yes		
⊔		

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Debtor 1 Tiaura L Wilson Washington	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.36		\$2,500.00
SSM St. Mary's	Last 4 digits of account number	
Nonpriority Creditor's Name 1015 Corporate Square Dr	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
St. Louis MO 63132		
City State ZIP Code Who incurred the debt2 Check one	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Medical	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.37		\$200.00
St Lukes Urgent Care	Last 4 digits of account number	
Nonpriority Creditor's Name 11550 Olive Blvd	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Saint Louis MO 63141	— — — — — — — — — — — — — — — — — — —	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
-	Other. Specify	
Check if this claim is for a community debt	Medical	
Is the claim subject to offset? No		
Yes		
4.38		\$700.00
St. Louis Community Credit Union Nonpriority Creditor's Name	Last 4 digits of account number	
3651 Forest Park	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
St. Louis MO 63108 City State ZIP Code	— — — — — — — — — — — — — — — — — — —	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?	Unsecured Loan	
No		
Yes		

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Debtor 1 Tiaura L Wilson Washington	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.39		\$50.00
Total Access Urgent Care	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
1090 N Hwy 67 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Florissant MO 63031	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Medical	
Is the claim subject to offset?		
☑ No		
Yes		
4.40		\$50.00
Total Access Urgent Care	Last 4 digits of account number	
Nonpriority Creditor's Name 10923 Olive Blvd	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Saint Louis MO 63141		
City State ZIP Code Who incurred the debt2 Check one	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
☐ Check if this claim is for a community debt	Medical Medical	
Is the claim subject to offset?		
☑ No □ Yes		
4.41		\$1,544.00
Value City Furniture	Last 4 digits of account number	
Nonpriority Creditor's Name 7077 Chippewa St	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Saint Louis MO 63119		
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Rental Furniture	
Is the claim subject to offset?		
☑ No		
Yes		

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Debtor 1	Tiaura L Wilson Washington	Case number (if known)	
Part 4:	Add the Amounts for Each Type of Unsecured Claim		

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
nomi art i	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. +	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
nom runt 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. +	\$62,814.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$62,814.00

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Fill i	n this inf	ormation to i	dentify your case:			
Debto	or 1	Tiaura First Name	L Middle Name	Wilson Washi Last Name	ngton	
Debto (Spou	or 2 ise, if filing)	First Name	Middle Name	Last Name		
United	d States Ba	nkruptcy Court fo	r the: EASTERN DIS	TRICT OF MISSOL	<u>JRI</u>	
Case (if knc	number own)					Check if this is an amended filing
Offici	al Form	106G				
Sche	dule G	: Executory	Contracts and	d Unexpired L	.eases	1:
1. Do	No. Che	ck this box and fi		urt with your other sch	nedules. You have nothing else t are listed on Schedule A/B: Prop	•
is	for (for exa	•	cle lease, cell phone).	•	ract or lease. Then state what for this form in the instruction bo	
	Person or	company with v	whom you have the co	ntract or lease	State what the contract or l	ease is for
2.1		ne Washingtor	1		Principal Residence	
	Name 3255 Her Number	rmoso Dr Street			Contract to be ASSUMEI	D
	Florissar	nt	МО	63033		
	City		State	ZIP Code		

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1	ll in this in	ormation to id	lentify your case	:			
De	btor 1	Tiaura	L	Wilson Washington			
1		First Name	Middle Name	Last Name			
	btor 2						
(Sp	oouse, if filing)	First Name	Middle Name	Last Name			
Un	ited States Ba	inkruptcy Court for	the: EASTERN DIS	STRICT OF MISSOURI			
Ca	se number						
	known)					Check if this is an	
						amended filing	
Off	icial Form	106H					
Sc.	hadula H	: Your Code	htors				1
<u> </u>	ilcudic II	. Tour oouc	Diors				_ '
1.	Do you have ☑ No ☐ Yes	any codebtors?	(If you are filing a jo	int case, do not list either spou	se as a codebtor.)		
		•		nity property state or territor, , New Mexico, Puerto Rico, Te		•	
	₩ No. Go	to line 3.					
	Yes. Did	d your spouse, forn	ner spouse, or legal e	quivalent live with you at the tire	ne?		
	□ No	•	ner spouse, or legal e	quivalent live with you at the ti	ne?		
	No Yes	3	, ,	,			
	No Yes In Column 1, person show creditor on S	s list all of your co on in line 2 again a Schedule D (Offici	debtors. Do not incl as a codebtor only if	lude your spouse as a codeb that person is a guarantor o edule E/F (Official Form 106E)	or if your spouse is f cosigner. Make sure	you have listed the	

Check all schedules that apply:

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F	ill in this inform	ation to ider	tify your case:				
	Debtor 1	Tiaura	L	Wilson V	Vashingtor	n	
		First Name	Middle Name	Last Name			eck if this is:
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		_	An amended filing
					SOLIDI		A supplement showing postpetition
	United States Bankro	uptcy Court for the	ne: EASTERN DI	STRICT OF MIS	SOURI	— [—]	chapter 13 income as of the following date:
	Case number (if known)				<u> </u>		MM / DD / YYYY
<u>O</u> f	ficial Form 10	<u>61</u>					, 25, 1111
Sc	chedule I: You	ur Income					12/15
res inc abo you	ponsible for supply lude information ab out your spouse. If ur name and case n	ring correct info out your spous more space is	ormation. If you are e. If you are separ needed, attach a se n). Answer every q	married and not ated and your spo parate sheet to th	filing jointly ouse is not f	/, and your filing with y	I Debtor 2), both are equally spouse is living with you, rou, do not include information any additional pages, write
1.	Fill in your employ information.	yment		Debtor 1			Debtor 2 or non-filing spouse
	If you have more th	_					
	job, attach a separa with information ab	9	ployment status	✓ Employed✓ Not employ	ed		☐ Employed☐ Not employed
	additional employe	rs.			ou		
	la alcola mantifica a		cupation	Carrier			_
	Include part-time, s or self-employed w		ployer's name	USPS			
	, ,	Σ	pioyei s name	55. 5			
	Occupation may in student or homema	— 11	ployer's address	222 S Taylor			November Officer
	applies.	anor, ir it		Number Street			Number Street
							_
				Saint Louis	MO	63122	
				City	State	Zip Code	City State Zip Code
		Но	w long employed th	nere? 2 week	s	_	
E	art 2: Give D	etails About	Monthly Income	e			
					ing to report	t for any line	, write \$0 in the space. Include your
	n-filing spouse unless			i. Il you have hou	iing to report	i ioi aily iiile	, write 40 in the space. Include your
•	ou or your non-filing : I need more space, a	•		er, combine the inf	ormation for	all employe	rs for that person on the lines below. If
,	• /	·			For D	Debtor 1	For Debtor 2 or non-filing spouse
2.			r, and commissions nthly, calculate what		2.	\$2,860.00	
3.	Estimate and list	monthly overtin	ne pay.		3. +	\$0.00	
4.	Calculate gross in	ncome. Add line	e 2 + line 3.		4.	\$2,860.00	

Official Form 106l Schedule I: Your Income page 1

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Deb	otor 1 Tiaura L Wilson Washington		Case nur	nber	(if knowr	n)		
			For Debtor 1		or Debto		•	
	Copy line 4 here	4.	\$2,860.00	_			_	
5.	List all payroll deductions:							
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00					
	5b. Mandatory contributions for retirement plans	5b.	\$0.00					
	5c. Voluntary contributions for retirement plans	5c.	\$0.00					
	5d. Required repayments of retirement fund loans	5d.	\$0.00					
	5e. Insurance	5e.	\$0.00					
	5f. Domestic support obligations	5f.	\$0.00					
	5g. Union dues	5g.	\$0.00					
	5h. Other deductions. Specify:	5h. -	\$0.00					
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$0.00	-				
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$2,860.00	-				
8.	List all other income regularly received:	0-	* 0.00					
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00	-				
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.							
	8b. Interest and dividends	8b.	\$0.00					
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00	-				
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.							
	8d. Unemployment compensation	8d.	\$0.00					
	8e. Social Security	8e.	\$0.00	-				
	8f. Other government assistance that you regularly receive							
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.							
	Specify:	8f.	\$0.00					
	8g. Pension or retirement income	- 8g.	\$0.00	-				
	8h. Other monthly income.	- 3		-				
	Specify:	8h. 4	\$0.00				1	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00	Ŀ				
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$2,860.00	+			=	\$2,860.00
11.	State all other regular contributions to the expenses that you list in S Include contributions from an unmarried partner, members of your housel friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that	nold, yo	our dependents, you					le J.
	Specify:					11.	+	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11.					12.		\$2,860.00
	income. Write that amount on the Summary of Your Assets and Liabilities if it applies.	s and (Certain Statistical In	iorma	ation,			ombined onthly income
13.	Do you expect an increase or decrease within the year after you file to							
	No. None. Debtors income is estimated as she jutility Yes. Explain: week at the post office. She has not yet received.			i.50/	hr and e	∍xpect	s 40	hours a

Official Form 106l Schedule I: Your Income page 2

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F	ill in this inforn	nation to ide	ntify yo	our case:			Oh a	-1. :£ 4h-:	. :		
	Debtor 1	Tiaura	ı		Wilso	n Washington		ck if this An am	s is: ended filing		
	DODIO! 1	First Name	N	Middle Name	Last Na			A supp	lement showing		
	Debtor 2 (Spouse, if filing)	First Name		Middle Name	Last Na	ıme			r 13 expenses a ng date:	as of the	
	United States Bank							1414/5	D 12001		
	Case number	rupicy Court for	uie. <u>L</u>	AOTEKIA DIOT	KICI OI I	WIIOOOOKI		MM / D	D / YYYY		
l	(if known)										
<u>Of</u>	ficial Form 10	<u>)6J</u>									
Sc	hedule J: Yo	our Expen	ses							1	2/15
cor nar	rect information. I	f more space is	s needed Answer e	, attach anothe every question	er sheet to t	ing together, both a his form. On the to					
1.	Is this a joint cas	se?									
2.	No	Debtor 2 live in s. Debtor 2 mus	st file Offi			s for Separate House	ehold o	f Debtor	2.		
۷.	Do not list Debtor			Fill out this infeach dependent		Dependent's relat Debtor 1 or Debto		p to	Dependent's age	Does deper	
	Debtor 2.					Child			1	□ No	
	Do not state the d names.	ependents'								- ☑ Yes □ No - □ Yes	
										No Yes	
										□ No	
										Yes No	
3.	Do your expense expenses of peo yourself and you	ple other than		No Yes						− ∏ Yes	
Р	art 2: Estim	ate Your On	going N	Monthly Exp	enses						
to r		of a date after	the bank		-	re using this form a supplemental Sche			-		
	lude expenses pai ch assistance and					ı know the value of cial Form 106l.)			Your expen	ses	
4.	The rental or hor Include first mortg								4.	\$80	0.00
	If not included in	line 4:									
	4a. Real estate t	axes							4a		
	4b. Property, hor	neowner's, or re	nter's ins	urance					4b		
	4c. Home mainte	enance, repair, a	and upke	ep expenses					4c		
	4d. Homeowner's	s association or	condomi	nium dues					4d.		_

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Debtor	Tiaura L Wilson Washington	Case number (if known)			
		Your expense	s		
5. A	dditional mortgage payments for your residence, such as home equity loans	5.			
6. U	tilities:				
6	a. Electricity, heat, natural gas	6a			
6	b. Water, sewer, garbage collection	6b			
6	c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$80.00		
6	d. Other. Specify:	6d			
7. F	ood and housekeeping supplies	7.	\$400.00		
8. C	hildcare and children's education costs	8.	\$400.00		
9. C	lothing, laundry, and dry cleaning	9.	\$200.00		
10. P	ersonal care products and services	10.	\$200.00		
11. M	ledical and dental expenses	11.			
	ransportation. Include gas, maintenance, bus or train are. Do not include car payments.	12.	\$200.00		
	ntertainment, clubs, recreation, newspapers, nagazines, and books	13.	\$200.00		
14. C	haritable contributions and religious donations	14.			
	o not include insurance deducted from your pay or included in lines 4 or 20.				
1:	5a. Life insurance	15a.			
1	5b. Health insurance	15b.			
1	5c. Vehicle insurance	15c	\$200.00		
1	5d. Other insurance. Specify: expected increase in rent/util	15d	\$480.00		
16. T S	axes. Do not include taxes deducted from your pay or included in lines 4 or 20. pecify:	16.			
17. lr	estallment or lease payments:				
1	7a. Car payments for Vehicle 1 car payments	17a	\$415.00		
1	7b. Car payments for Vehicle 2	17b			
1	7c. Other. Specify:	17c.			
1	7d. Other. Specify:				
	our payments of alimony, maintenance, and support that you did not report as educted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.			
	ther payments you make to support others who do not live with you.	19.			

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Deb	tor 1	Tiaura L Wilson Washington	Case number (if known)	
20.		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	
	20b.	Real estate taxes	20b	
	20c.	Property, homeowner's, or renter's insurance	20c.	
	20d.	Maintenance, repair, and upkeep expenses	20d.	
	20e.	Homeowner's association or condominium dues	20e	
21.	Other	r. Specify:	21. +	
22.	Calcu	alate your monthly expenses.		
	22a.	Add lines 4 through 21.	22a	\$2,855.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106	J-2. 22b	_
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$2,855.00
23.	Calcu	ulate your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$2,860.00
	23b.	Copy your monthly expenses from line 22c above.	23b. _	\$2,855.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$5.00
24.	Do yo	ou expect an increase or decrease in your expenses within the year after	you file this form?	
		xample, do you expect to finish paying for your car loan within the year or do yent to increase or decrease because of a modification to the terms of your mo		
	□ ¹	No.		
	Ø `	Yes. Explain here: None. Debtor expects to move out in approximately 1 month are listed.	n after filing and expected incre	eased expenses

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G	ill in this inf	ormation to	identify your case:			
D	ebtor 1	Tiaura	L	Wilson Washington		
_		First Name	Middle Name	Last Name		
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		
υ	Inited States Ba	nkruptcy Court	for the: EASTERN DIS	TRICT OF MISSOURI		
c	ase number				Chook if	this is an
(i	f known)				amende	this is an d filing
Oi	fficial Form	106Sum				
Sı	ummary o	f Your Ass	ets and Liabilit	ies and Certain Stat	istical Information	12/15
coi scl	rrect informationedules after y	on. Fill out all o	of your schedules first; ginal forms, you must fi	then complete the information	ooth are equally responsible for non this form. If you are filing eck the box at the top of this p	g amended
						Your assets Value of what you own
1.	Schedule A/E	3: Property (Office	cial Form 106A/B)			,
	1a. Copy line	e 55, Total real	estate, from Schedule A/	В		\$0.00
	1b. Copy line	e 62, Total perso	onal property, from Sche	dule A/B		\$12,460.00
	1c. Copy line	e 63, Total of all	property on Schedule A	/B		\$12,460.00
P	Part 2: Su	mmarize Yo	ur Liabilities			
						Your liabilities Amount you owe
2.				Property (Official Form 106D) claim, at the bottom of the last	page of Part 1 of Schedule D	\$13,460.00
3.			Have Unsecured Claims m Part 1 (priority unsecu	,	edule E/F	\$0.00
	3b. Copy the	e total claims fro	m Part 2 (nonpriority uns	ecured claims) from line 6j of S	chedule E/F	\$62,814.00
					Your total liabilities	\$76,274.00
E	Part 3: Su	mmarize Yo	ur Income and Exp	enses		
4.		our Income (Off		Schedule I		\$2,860.00
5.			(Official Form 106J) from line 22c of Schedul	e J		\$2,855.00

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Del	otor 1	Tiaura L Wilson Washington	Case number ((if known)			
P	art 4:	Answer These Questions for Administrative and Statistic	al Records	;			
6.	Are y	rou filing for bankruptcy under Chapters 7, 11, or 13?					
		No. You have nothing to report on this part of the form. Check this box and sub	omit this form t	to the court with you	ur other schedules.		
7.	. What kind of debt do you have?						
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.						
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.						
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$1,870.17						
9.	Сору	the following special categories of claims from Part 4, line 6 of <i>Schedule</i>	E/F:				
			Т	otal claim			
	From	Part 4 on Schedule E/F, copy the following:					
	9a. [Domestic support obligations. (Copy line 6a.)	_	\$0.00	<u>)</u>		
	9b	Taxes and certain other debts you owe the government. (Copy line 6b.)	_	\$0.00	<u>)</u>		
	9c. (Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	_	\$0.00	<u>)</u>		
	9d. \$	Student loans. (Copy line 6f.)	_	\$0.00	<u>)</u>		
		Obligations arising out of a separation agreement or divorce that you did not reppriority claims. (Copy line 6g.)	oort as _	\$0.00	<u>)</u>		
	Qf [Debts to pension or profit-sharing plans, and other similar debts. (Conv. line 6b.)	+	\$0.00)		

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

\$0.00

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Fill in this inf	ormation to i	dentify your case	:	
Debtor 1	Tiaura First Name	L Middle Name	Wilson Washington Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court fo	or the: EASTERN DIS	TRICT OF MISSOURI	
Case number (if known)				Check if this is an amended filing
Official Form	106Dec			
Declaration	About an I	ndividual Debt	or's Schedules	12/15
\$250,000, or impri			y fraud in connection with a bar 18 U.S.C. §§ 152, 1341, 1519, ar	nkruptcy case can result in fines up to ad 3571.
			on ottomorrae halmren fill anti-	
	or agree to pay s	someone wno is NO i	an attorney to help you fill out I	pankruptcy forms?
☑ No ☐ Yes. Na	ame of person _			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

MM / DD / YYYY

MM / DD / YYYY

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Fill in this inf	ormation to ider	ntify your cas	e:			
Debtor 1	Tiaura	L		/ashington		
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
	nkruptcy Court for the	· FASTERN DI	STRICT OF MI	SSOURI		
	initiapitely Count for the	E LASTEINI DI	STRICT OF WIL	3300KI		
Case number (if known)					Check if t amended	
Official Form	107					
Statement o	f Financial Af	fairs for In	dividuals F	iling for Bankruptcy		04/16
Part 1: Giv 1. What is your	current marital state ed st 3 years, have you	Your Marital us? lived anywhere lived in the last 3	Status and W	There You Lived Before e you live now? clude where you live now. Debtor 2:		Dates Debtor 2 lived there
				Same as Debtor 1		☐ Same as Debtor 1
1224 Cim	arron Dr	F	rom 8/18			From
Number	Street		• 12/18	Number Street		То
				<u> </u>		-
Saint Lo		63132				_
City	State	ZIP Code		City St	ate ZIP Code	
Debtor 1:			ates Debtor 1 ved there	Debtor 2:		Dates Debtor 2 lived there
				Same as Debtor 1		☐ Same as Debtor 1
8021 Haf	ner Ct	F	rom 1/18			From
	Street	Т		Number Street		То
Saint Lo	uis MO	63130				-
City		ZIP Code		City St	ate ZIP Code	_

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Debtor 1 Tiaura L Wilson Washington	1	Case nur	mber (if known)		
Debtor 1:	Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there	
		☐ Same as Debto	or 1	☐ Same as Debtor 1	
1230 Purdue	From 2 years			From	
Number Street	To1/18	Number Street		То	
Saint Louis MO 63130					
City State ZIP Cod	de	City	State ZIP Code		
Yes. Make sure you fill out Schedule Part 2: Explain the Sources of Y 4. Did you have any income from employs Fill in the total amount of income you recell fyou are filing a joint case and you have No	Your Income ment or from operating a believed from all jobs and all bu	ousiness during this ye usinesses, including par	t-time activities.	alendar years?	
Yes. Fill in the details.					
	Debtor 1		Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions	
From January 1 of the current year until the date you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips	\$4,000.00	Wages, commissions, bonuses, tips		
	Operating a business		Operating a business		
For the last calendar year:		\$29,000.00	☐ Wages, commissions, bonuses, tips		
(January 1 to December 31, 2018)	Operating a business		Operating a business		
For the calendar year before that:	Wages, commissions, bonuses, tips	\$26,000.00	☐ Wages, commissions, bonuses, tips		
(January 1 to December 31, 2017)	Operating a business		Operating a business		

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Deb	otor 1	Tiaura L Wilson Washingto	n	Case nu	mber (if known)		
5.	Include unempl	u receive any other income during income regardless of whether the loyment; and other public benefit mbling and lottery winnings. If you 1.	at income is taxable. Exampayments; pensions; rental	ples of other income are income; interest; dividen	alimony; child support; S ds; money collected from	lawsuits; royalties;	
	List ead	ch source and the gross income f	rom each source separately	v. Do not include income	that you listed in line 4.		
	□ No ✓ Yes	s. Fill in the details.					
			Debtor 1		Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions	
		ary 1 of the current year until u filed for bankruptcy:	Food Stamps	\$260.00			
		calendar year: o December 31, 2018)	Food Stamps	\$1,040.00			
		YYYY					
		endar year before that:			-		
(Jar	nuary 1 to	o December 31, <u>2017</u>)					

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Deb	otor 1	Гiaura L Wilson Washington	Case number (if known)
P	art 3:	List Certain Payments You Made Before Y	ou Filed for Bankruptcy
6.	Are eithe	er Debtor 1's or Debtor 2's debts primarily consumer	debts?
	□ No.	Neither Debtor 1 nor Debtor 2 has primarily consur "incurred by an individual primarily for a personal, fam	ner debts. Consumer debts are defined in 11 U.S.C. § 101(8) as illy, or household purpose."
		During the 90 days before you filed for bankruptcy, did	you pay any creditor a total of \$6,425* or more?
		☐ No. Go to line 7.	
		total amount you paid that creditor. Do not in	otal of \$6,425* or more in one or more payments and the clude payments for domestic support obligations, such as de payments to an attorney for this bankruptcy case.
		* Subject to adjustment on 4/01/19 and every 3 years	after that for cases filed on or after the date of adjustment.
	✓ Yes.	Debtor 1 or Debtor 2 or both have primarily consur	ner debts.
		During the 90 days before you filed for bankruptcy, did	you pay any creditor a total of \$600 or more?
		✓ No. Go to line 7.	
			otal of \$600 or more and the total amount you paid that tic support obligations, such as child support and alimony. for this bankruptcy case.
7.	Insiders corporati agent, in	include your relatives; any general partners; relatives of ons of which you are an officer, director, person in contro	payment on a debt you owed anyone who was an insider? any general partners; partnerships of which you are a general partner; ol, or owner of 20% or more of their voting securities; and any managing tor. 11 U.S.C. § 101. Include payments for domestic support obligations
	✓ No ☐ Yes.	List all payments to an insider.	
8.		year before you filed for bankruptcy, did you make a d an insider?	ny payments or transfer any property on account of a debt that
	Include p	ayments on debts guaranteed or cosigned by an insider	
	✓ No ☐ Yes.	List all payments that benefited an insider.	

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Debtor 1		Tiaura L Wilson Washington	Case number (if known)		
Pa	art 4:	Identify Legal Actions, Repossessions, and Foreclosur	es		
9.	List all s	year before you filed for bankruptcy, were you a party in any lawsuit uch matters, including personal injury cases, small claims actions, divorce tions, and contract disputes.	•		
	✓ No ☐ Yes	. Fill in the details.			
10.	seized,	year before you filed for bankruptcy, was any of your property reposor levied? Il that apply and fill in the details below.	sessed, foreclosed, garnished, attached,		
		Go to line 11. Fill in the information below.			
11.		00 days before you filed for bankruptcy, did any creditor, including a k s from your accounts or refuse to make a payment because you owed	· •		
	✓ No ☐ Yes	. Fill in the details.			
12.		year before you filed for bankruptcy, was any of your property in the s, a court-appointed receiver, a custodian, or another official?	possession of an assignee for the benefit of		
	✓ No ☐ Yes				
Pa	art 5:	List Certain Gifts and Contributions			
13.	Within 2	2 years before you filed for bankruptcy, did you give any gifts with a to	otal value of more than \$600 per person?		
	✓ No ☐ Yes	. Fill in the details for each gift.			
14.	Within 2 to any o	e years before you filed for bankruptcy, did you give any gifts or contribarity?	ibutions with a total value of more than \$600		
	✓ No ☐ Yes	. Fill in the details for each gift or contribution.			
Pa	art 6:	List Certain Losses			
15.		year before you filed for bankruptcy or since you filed for bankruptc saster, or gambling?	y, did you lose anything because of theft, fire,		
	✓ No ☐ Yes	. Fill in the details.			

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Debtor 1		Tiaura L Wilson	Washington		Case number (if known)			
P	art 7:	List Certain P	ayments or	Transfers				
16.				ptcy, did you or anyone else acting o nkruptcy or preparing a bankruptcy p		or transfer any pro	perty to	
	Include	any attorneys, bank	ruptcy petition p	reparers, or credit counseling agencies	s for services requi	red for your bankrupt	cy.	
	□ No ☑ Yes	s. Fill in the details.						
	nathan E			Description and value of any prope \$898 (\$499 attorney fee; \$335 fi credit counseling and report fe	iling fee; \$64	Date payment or transfer was made	Amount of payment	
				_	,	2/27/19	\$200.00	
Num	ber Str	eet		-		3/4/19	\$698.00	
City		State	ZIP Code	-				
Ema	il or websi	te address		-				
Pers	on Who M	lade the Payment, if Not	You	-				
17.		•		ptcy, did you or anyone else acting o vith your creditors or to make payme			perty to	
	Do not i	nclude any payment	or transfer that	you listed on line 16.				
	✓ No ☐ Yes	s. Fill in the details.						
18.		•		uptcy, did you sell, trade, or otherwis se of your business or financial affai		operty to anyone, ot	her than	
		-		s made as security (such as granting of nave already listed on this statement.	a security interest	or mortgage on your	property).	
	☑ No	s. Fill in the details.						
19.				ruptcy, did you transfer any property called asset-protection devices.)	to a self-settled t	rust or similar devic	e of which	
	✓ No	s. Fill in the details.						

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Debtor 1		Tiaura L Wilson Washington	Case number (if known)		
P	art 8:	List Certain Financial Accounts, Instruments, Safe Dep	osit Boxes, and Storage Units		
20.		year before you filed for bankruptcy, were any financial accounts or closed, sold, moved, or transferred?	instruments held in your name, or for your		
		checking, savings, money market, or other financial accounts; certificates pension funds, cooperatives, associations, and other financial institutions.	·		
	✓ No ☐ Yes	Fill in the details.			
21.	-	now have, or did you have within 1 year before you filed for bankruptorities, cash, or other valuables?	cy, any safe deposit box or other depository		
	✓ No ☐ Yes	Fill in the details.			
22.	Have yo	u stored property in a storage unit or place other than your home with	nin 1 year before you filed for bankruptcy?		
	✓ No ☐ Yes	Fill in the details.			
P	art 9:	Identify Property You Hold or Control for Someone Else	•		
23.	-	hold or control any property that someone else owns? Include any printrust for someone.	operty you borrowed from, are storing for,		
	✓ No ☐ Yes	Fill in the details.			
P	art 10:	Give Details About Environmental Information			
For	the purp	ose of Part 10, the following definitions apply:			
ı	nazardou	nental law means any federal, state, or local statute or regulation conc s or toxic substance, wastes, or material into the air, land, soil, surfac statutes or regulations controlling the cleanup of these substances, w	e water, groundwater, or other medium,		
		ns any location, facility, or property as defined under any environment or used to own, operate, or utilize it, including disposal sites.	tal law, whether you now own, operate, or		
		s material means anything an environmental law defines as a hazard e, hazardous material, pollutant, contaminant, or similar item.	ous waste, hazardous substance, toxic		
Rep	ort all no	tices, releases, and proceedings that you know about, regardless of v	when they occurred.		
24.	Has any law?	governmental unit notified you that you may be liable or potentially li	able under or in violation of an environmental		
	✓ No ☐ Yes	. Fill in the details.			

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Deb	tor 1	Tiaura L Wilson Washington	Case number (if known)					
25.	Have yo	u notified any governmental unit of any re	lease of hazardous material?					
	✓ No ☐ Yes.	Fill in the details.						
26.	Have yo orders.	u been a party in any judicial or administra	ative proceeding under any environmental law? Include settlements and					
	✓ No ☐ Yes.	Fill in the details.						
Pa	art 11:	Give Details About Your Busines	s or Connections to Any Business					
27.	Within 4 busines	· · · · · · · · · · · · · · · · · · ·	you own a business or have any of the following connections to any					
		A member of a limited liability company (LLC A partner in a partnership An officer, director, or managing executive of	of a corporation					
	_	An owner of at least 5% of the voting or equity securities of a corporation						
	للنا	None of the above applies. Go to Part 12. Check all that apply above and fill in the de	tails below for each business.					
28.		years before you filed for bankruptcy, did cial institutions, creditors, or other parties	you give a financial statement to anyone about your business? Include					
	□ No □ Yes.	Fill in the details below.						
Pa	art 12:	Sign Below						
that prop or b	answers perty by f oth. 18 U	are true and correct. I understand that m raud in connection with a bankruptcy case J.S.C. §§ 152, 1341, 1519, and 3571.						
		Vilson Washington, Debtor 1	Signature of Debtor 2					
	Date	03/04/2019	Date					
Did	you attac	ch additional pages to Your Statement of F	inancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?					
Did	you pay	or agree to pay someone who is not an att	orney to help you fill out bankruptcy forms?					
		ne of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					

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						_		
Fill	in this info	ormatio	n to identify your c	ase:				
Debt	or 1	Tiaura	L	Wils	son Washington]		
		First Name	Middle Name		Name			
Debt								
(Spo	use, if filing)	First Name	Middle Name	Last	Name			
Unite	ed States Bar	kruptcy C	ourt for the: EASTERN	DISTRICT	OF MISSOURI			
	number						Г	Check if this is an
(if kn	own)						_	amended filing
Offic	ial Form	108						
Stat	ement o	f Inten	tion for Individu	uals Filing	g Under Chap	ter 7		12/15
If you	are an indivi	dual filing	g under chapter 7, you	must fill out t	his form if:			
■ cre	ditors have	claims se	cured by your property	, or				
■ you	ı have lease	d persona	al property and the leas	se has not exp	oired.			
of cred		ever is e	the court within 30 day arlier, unless the court form.					_
	-	-	ing together in a joint o	ase, both are	equally responsible	for supplying correct	t informatio	on.
	onal pages, v	write youi	e as possible. If more rame and case numb	er (if known).	•	e sheet to this form.	On the top	of any
	or any credit		ou listed in Part 1 of Selow.	Schedule D: C	reditors Who Hold C	laims Secured by Pro	perty (Offic	cial Form 106D),
ld	lentify the cr	editor an	d the property that is c	ollateral	What do you inten property that secu		-	claim the property
	reditor's ame:	Westla	ke Financial Service	es	Surrender the Retain the pro	property. perty and redeem it.	□ No	
D	escription of	2014 F	ord Explorer (approx	x. 128.000		perty and enter into a		
рі	roperty ecuring debt:	miles)			Reaffirmation Retain the pro	Agreement. perty and [explain]:		
Part	2: List	Your U	nexpired Personal	Property L	eases			
fill in t	he informati	on below	property lease that yo . Do not list real estate e an unexpired person	leases. Unex	cpired leases are leas	ses that are still in eff	ect; the lea	se period has not
D	escribe you	unexpire	ed personal property le	ases			Will this I	ease be assumed?
Le	essor's name	-	lacqueline Washingt Principal Residence	on			□ No ✓ Yes	

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Debtor 1	Tiaura L Wilson Washington		Case number (if known)
Part 3:	Sign Below		
	enalty of perjury, I declare that I ha	•	out any property of my estate that secures a debt and
X /s/ Tiau	ıra L Wilson Washington	_ x	
Tiaura L	Wilson Washington, Debtor 1	Signature of Debto	72
Date 0	3/04/2019	Date	
M	IM / DD / YYYY	MM / DD / Y	YYY

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MISSOURI ST. LOUIS DIVISION

In	re Tiaura L Wilson Washington	Case No.	
		Chapter	7
	DISCLOSURE OF COMPENSATION OF ATTOR	RNEY FOR	DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the that compensation paid to me within one year before the filing of the petition in be services rendered or to be rendered on behalf of the debtor(s) in contemplation is as follows:	ankruptcy, or a	agreed to be paid to me, for
	For legal services, I have agreed to accept	<u> </u>	\$499.00
	Prior to the filing of this statement I have received		\$499.00
	Balance Due		\$0.00
2.	. The source of the compensation paid to me was:		
	☑ Debtor ☐ Other (specify)		
3.	. The source of compensation to be paid to me is:		
	✓ Debtor ☐ Other (specify)		
4.	I have not agreed to share the above-disclosed compensation with any other associates of my law firm.	er person unles	ss they are members and
	☐ I have agreed to share the above-disclosed compensation with another persassociates of my law firm. A copy of the agreement, together with a list of the compensation, is attached.		
5.	. In return for the above-disclosed fee, I have agreed to render legal service for al	l aspects of the	e bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor bankruptcy;	in determining	g whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of affairs and pla	n which may b	pe required;
	c. Representation of the debtor at the meeting of creditors and confirmation hea	ring, and anv	adiourned hearings thereof:

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B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: Adversary Proceedings; Appeals

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

03/04/2019 /s/ Jonathan Brent

Date

Jonathan Brent Bar No. 59169MO

Jonathan Brent Attorney at Law 462 N Taylor Suite 105

St. Louis, MO 63108

Phone: (314) 200-5346 / Fax: (314) 735-4046

/s/ Tiaura L Wilson Washington

Tiaura L Wilson Washington

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UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MISSOURI ST. LOUIS DIVISION

IN RE: Tiaura L Wilson Washington CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

knowl	The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.						
Date .	3/4/2019	Signature .	/s/ Tiaura L Wilson Washington				
			Tiaura L Wilson Washington				

1STPROGRESS
P.O. Box 9053
Johnson City, TN 37615

ACCEPTANCE NOW 5501 HEADQUARTERS DR PLANO, TX 75024

Advance America 1261 S Laclede Station Rd Saint Louis, MO 63119

Ameren UE Bankruptcy Desk code 310 PO Box 66881 Saint Louis, MO 63166

AT&T Services One AT&T Way Rm 3A104 Bedminster, NJ 07921

Bank of America 4625 Lindell Blvd Saint Louis, MO 63108

Barnes Jewish Hospital 1 Barnes Jewish Hospital Plaza St. Louis, MO 63110

Big Lots 8563 Watson Rd Saint Louis, MO 63119

Cardinal Orthodontist 24 S Gore Ave Saint Louis, MO 63119 Cashnet USA 200 West Jackson, Ste 2400 Chicago, IL 60606

CBE Group 1309 Technology Pkwy Cedar Falls, IA 50613

ChexSystems
Attn: Consumer Relations
7805 Hudson Road, Ste 100
Woodbury, MN 55125

Department of Education Navient P.O. Box 9533
Wilkes Barre, PA 18773

Enhanced Recovery 8014 Bayberry Rd Jacksonville, FL 32256

Equifax P.O. Box 740241 Atlanta, GA 30374

Experian P.O. Box 4500 Allen, TX 75013

Familia Dental 2608 State St East Saint Louis, IL 62205

First Community CU 17151 Chesterfield Airport Road Chesterfield, MO 63005 Hafner Court PO Box 1839 Maryland Heights, MO 63043

Hafner Court Apartments 8077 Hafner Ct Saint Louis, MO 63130

Internal Revenue Service PO Box 7346 Philedelphia PA 19101-7346

Jacqueline Washington 3255 Hermoso Dr Florissant, MO 63033

LendNation 8208 Melrose Drive Overland Park, KS 66214

Missouri American Water PO Box 578 Alton, IL 62002

Missouri Department of Revenue Bankruptcy Unit PO Box 475 301 W High St Jefferson City, MO 65105

Missouri Title Loans 8900 St Charles Rock Rd Saint Ann, MO 63074

One Advantage 7650 Magna Dr Belleville, IL 62223 PNC Bank Attn: Bankruptcy Dpt. One PNC Plaza 249 Fifth Ave. Pittsburgh, PA 15222

Quick Cash 9905 St Charles Rock Rd Saint Ann, MO 63074

Republic Services 406 Bayless Ave Saint Louis, MO 63125

Spire Gas 700 Market St 2nd Fl Saint Louis, MO 63101

Sprint
Attn Bankruptcy Dpt
PO Box 3326
Englewood, CO 80155

SSM St. Mary's 1015 Corporate Square Dr St. Louis, MO 63132

St Lukes Urgent Care 11550 Olive Blvd Saint Louis, MO 63141

St. Louis Community Credit Union 3651 Forest Park St. Louis, MO 63108

Telecheck Attention: Bankruptcy Department P.O. Box 4451 Houston, TX 77210

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Total Access Urgent Care 1090 N Hwy 67 Florissant, MO 63031

Total Access Urgent Care 10923 Olive Blvd Saint Louis, MO 63141

Transunion P.O. Box 1000 Chester, PA 19022

Value City Furniture 7077 Chippewa St Saint Louis, MO 63119

Westlake Financial Services 137 North Virgil Ave #100 Los Angeles, CA 90004

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_					_		
F	II in this in	formation to	identify your case:			x only as directed in t	his
De	ebtor 1	Tiaura	L	Wilson Washington	_	orm 122A-1Supp:	
		First Name	Middle Name	Last Name	11	esumption of abuse.	
	ebtor 2 pouse, if filing)	First Name	Middle Name	Last Name	of abuse appli	n to determine if a presumpt es will be made under Chap alculation (Official Form 122	oter 7
Ur	nited States Ba	ankruptcy Court fo	or the: EASTERN DIS	TRICT OF MISSOURI		est does not apply now becau	
	ase number known)				of qualified mi	litary service but it could app	ply
					Check if this is	an amended filing	
Of	ficial Form	122A-1					
Ch	apter 7 S	tatement c	of Your Current	Monthly Income			12/15
info are mili 122	rmation appli exempted fro tary service, o A-1Supp) with	es. On the top on a presumption complete and file this form.	of any additional pages n of abuse because yo	neet to this form. Include the write your name and case u do not have primarily consion from Presumption of Ab	number (if known). If sumer debts or becaus	you believe that you se of qualifying	
1.	What is your	marital and filir	ng status? Check one o	only.			
	Not mar	ried. Fill out Col	umn A, lines 2-11.				
				ll out both Columns A and B, l	ines 2-11		
				ou. You and your spouse are			
	_					nos 2 11	
		-		t legally separated. Fill out be			
	dec	clare under penal	ty of perjury that you and	 Fill out Column A, lines 2-11 d your spouse are legally sepa that do not include evading t 	arated under nonbankru	ptcy law that applies or that	you
	bankruptcy of August 31. If in the result.	case. 11 U.S.C. the amount of your Do not include a	§ 101(10A). For exampour monthly income varing income amount more	ed from all sources, derived ble, if you are filing on Septem ed during the 6 months, add the than once. For example, if b have nothing to report for any	ber 15, the 6-month per ne income for all 6 mon oth spouses own the sa	iod would be March 1 throughths and divide the total by 6. Ime rental property, put the	
					Debtor 1 De	lumn B btor 2 or n-filing spouse	
2.	_	vages, salary, ti yroll deductions).	ps, bonuses, overtime,	and commissions	\$1,653.50		
3.	Alimony and if Column B is	-	ayments. Do not includ	le payments from a spouse	\$0.00		
4.	expenses of regular contri your depende	you or your dep butions from an u ents, parents, and	e which are regularly poendents, including chi unmarried partner, memb d roommates. Include re not filled in. Do not inclu	ild support. Include bers of your household, egular contributions from	\$0.00		

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Deb	btor 1 Tiaura L Wilson Washin	gton		c	ase number (if k	nown)	
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
5.	Net income from operating a busing	ness, profession, o	or farm				
		Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00		_			
	Ordinary and necessary operating expenses	\$0.00		_ Сору			
	Net monthly income from a business profession, or farm	s, \$0.00		here	\$0.00		
6.	Net income from rental and other	real property					
		Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00		_			
	Ordinary and necessary operating expenses			– Copy			
	Net monthly income from rental or other real property	\$0.00		_ here →	\$0.00		
7.	Interest, dividends, and royalties				\$0.00		
В.	Unemployment compensation				\$0.00		
	Do not enter the amount if you conte benefit under the Social Security Act						
	For you		\$0	0.00			
	For your spouse						
9.	Pension or retirement income. Do was a benefit under the Social Secu		nount received tha	at	\$0.00		
10.	D. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.						
	Foodstamps				\$216.67		
	Total amounts from separate pages,	if any.				+	
11.	Calculate your total current month			Γ			
	Add lines 2 through 10 for each colu Then add the total for Column A to the	mn.	R		\$1,870.17	+[]=	\$1,870.17
	THEIT AUG THE TOTAL TOLICULARITY A TO IT	ie ioiai ioi ColuiIIII I	D.				Total current

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Debtor 1		<u>Ti</u>	iaura L Wilson Washington		Case number (if known)		
P	art 2:		Determine Whether the Means	Геst Applies to You			
12.	Calc	ulate	your current monthly income for the y	ear. Follow these steps:			
	12a.	Cop	by your total current monthly income from	line 11	Copy line 11 here 😝 12a. \$1,870.	17	
		Mul	tiply by 12 (the number of months in a ye	ar).	X 12		
	12b.	The	e result is your annual income for this part	t of the form.	12b. \$22,442.	04	
13.	Calc	ulate	the median family income that applies	to you. Follow these steps:			
	Fill in	the s	state in which you live.	Missouri			
	Fill in	the r	number of people in your household.	2			
	Fill in	the r	median family income for your state and s	size of household		00	
			ist of applicable median income amounts s for this form. This list may also be avai		•		
14.	How	do th	ne lines compare?				
	14a.		Line 12b is less than or equal to line 13 Go to Part 3.	. On the top of page 1, check b	pox 1, There is no presumption of abuse.		
	14b.		Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2.	op of page 1, check box 2, The	presumption of abuse is determined by Form 122A-2.		
P	art 3:		Sign Below				
	By	signir	ng here, I declare under penalty of perjury	that the information on this sta	atement and in any attachments is true and correct.		
	·				,		
			iaura L Wilson Washington a L Wilson Washington, Debtor 1	X Signa	ature of Debtor 2	-	
		Date _.	3/4/2019	Date			
			MM / DD / YYYY		MM / DD / YYYY		
	If yo	If you checked line 14a, do NOT fill out or file Form 122A-2.					

Official Form 122A-1

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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Current Monthly Income Calculation Details

In re: Tiaura L Wilson Washington Case Number:

Chapter: 7

2. Gross wages, salary, tips, bonuses, overtime and commissions.

Debtor or Spouse's Income	Description (if	Description (if available)									
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month				
Debtor	Bank of Ame \$2,422.00	Bank of America \$2,422.00 \$2,422.00 \$2,422.00 \$0.00									
Debtor	Longevity \$0.00	\$0.00	\$0.00	\$0.00	\$66.00	\$167.00	\$38.83				

10. Income from all other sources not listed above.

Debtor or Spouse's Income	Description (if available)										
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month				
Debtor	Foodstamps \$260.00	-	\$260.00	\$260.00	\$260.00	\$0.00	\$216.67				